FILE REVIEW NOTES



		:Inspection Date:
Case Name (Employer/Cor Reviewed By:		Date of Review:
I. General Case Construct [] Appropriate sections util [] Exhibits labeled correctly [] All required OSHA form [] Adequate Number of Int	ized y (if applicable) s completed	Circle box if corrections needed & comment below. [] Forms forwarded in timely fashion [] Employees [] Employer Representatives [] Pertinent witnesses, etc. (if accident investigation)
Reviewer's Comments:		
II. Citation Issues: Che	eck if o.k. Circle	box if corrections needed & comment below.
manner. No superfluous in a superfluous in a superfluous in a superfluous in a sufficient in a	shown in AVD and a process, equipment, he information is included that it is sentence structuration, sentence structuration, sentence structuration, sentence if all dequately identified a tly stated. (Does the inployee" matched with oyee would not ordinate.	at top of 1B. hazard materials/chemicals, (as applicable) in a clear, concise ed. eture is adequate and understandable. hade in narrative, notes, photos, video, etc. shown violations were addressed. had documented. (exercise of reasonable diligence alone is not haipiury/illness match the probability/severity?) the the correct violation? (Note: Unless it is a very small arrily be exposed to every single violation cited during the
Reviewer's Comments:		
III. Programmatic Issues:		
[] Adequate documentation	n for all programs requ	uired as to their presence, absence, or shortfalls.
IV. General Comments by	Reviewer:	

This form and other deline ated elements (i.e., VOSH- 1B's, narrative pages, etc.) showing corrections to be made will be filed in Section. II, Exhibit. 8 - Notes. This form is for internal use only and is not discoverable through F.O.I.A. requests.